

LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT NET PROFITS LICENSE FEE RETURN

夏泉					QUE	STIO	NS (ANSWE	R FULL	Y)		
	ALLICA N	Account Number		A. N	lature of business						
1	MIUUN	Fiscal Year Ended		————	Date business start		Fayette County				
		riscal fear Ended		III .	oid you have emplo				009∄∐Yes ∐No		
		Federal ID or SSN		- 11	Basis on which this			☐ Cash	Accrual		
PLEASE NOTIFY THIS OFFICE OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS SHOWN BELOW					E. Filing status per federal return: Corporation S-Corp Partnership Individual Owner Other						
					s the Business Ent Consolidated Feder f Yes, FEIN of Par	al Ret	urn? Yes 🔲 1	bsidiary No 🔲	of a		
				G. 1	f organization was □Dissolution □ Sal Sucessor Name, ac	disc	ontinued, check Merger Date:				
Initi	ial	mended [F	inal Address Chang								
L			FILING S	TATUS	<u> </u>						
1.□ ∨	VORKSHEET I	(Federal Schedule	e C, Schedule E, Schedule F,	, and (or) 1099-Misc)						
			065 and Form 8825 if App								
3. \ \N	VORKSHEET ((Federal Form 1	120 or 1120A or Form 11								
			SECTION 1: CALC	CULATION	ON OF LICENSE	FEE	LIABILITY				
	1. Adiu	sted Net business	s Income from Applicabl	e Worl	sheet	1.			ice Use Only		
	_		Percentage (Section 2, Lin		I	2.					
Attach		-	o License fee (Line 1 X			3.					
	4. Sole	Proprietors 65 y	years or Older deduct \$3	,000							
	N 5. Adju	sted Net Profits	(Line 3 - Line 4)			5.					
Payment	6 Tion	nse Tax Liability	(Line 5 X 2.25%)			6.					
1 ayınıcını	7. Less	pre-paid Annual	License Fee			7.					
			ine 7) cannot be less thents and Credits (Attach			8. 9.		Make Ch	neck Payable to:		
Here		•				10.		Mail to:			
	P 11. Pena	lty @ 5% per m	onth (or portion thereof, not to	exceed 25				Division of Revenue Lex-Fay Urban Co Govt			
	L 12. Inter		onth (or portion thereof)			12.		P.O. Box	× 14058		
	$ \mathbf{E} _{13. \text{ TOT}}$	AL AMOUNT D	DUE			13.		Lexingto	on KY 40512		
	14. Over	payment Claimed	Refund Cred	lit		14.					
			SECTION 2: CALC	JLATIO	N OF ALLOCAT	TION	PERCENTAG	=			
				<i>32,</i> 1110	Column A		Column B		Column C		
		ALLOCATION F	-ACTORS		URBAN COUNTY FA	ACTOR	TOTAL FACT	OR	PERCENTAGE		
1 Sales	s factor (see	instructions)			\$		\$				
Sales factor (see instructions) Payroll factor (see instructions)					\$	\$					
					·L						
3. Total	I percentages	(add Column C, Li	nes 1 and 2)								
4. Aver	age allocation	percentage (Colum	nn C, Line 3 divided by num	ber of p	percents) Enter o	n Lir	ne 2, Section	1			
I hereby	certify that	he statements mad	e herein and in any supporti	ng sched	dules are true, cor	rect	& complete to	the best	of my knowled		
							-				
Preparer's	s Signature (r	eturn must be sign	ned above) Date	Signatur	e of Licensee (ret	turn n	nust be signed	above)	Dat		
D :				D							
Print Nam	ne		Federal ID	Print Na	me						
			Dhama #								
Address			Phone #	Title				Phone	#		

ALL FEDERAL ID NUMBERS OR SOCIAL SECURITY NUMBERS MUST BE SUPPLIED FOR BOTH THE TAX PREPARER & LICENSEES

IMPORTANT Enclose Copy of Applicable Federal Forms(s) & Schedule(s)

LEXINGTON-FAYETTE URBAN COUNTY GOVT NET PROFIT WORKSHEET

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	. 1 or motor (a) and a source (b)		
	WORKSHEET I: For Business Entities required to file an INDIVIDUAL U.S. Income Ta	ax F	Return
1.	Non-employee compensation as reported on Form 1099-Misc Reported as "Other Income" on federal Form 1040 (attach Page 1 of Form 1040 and Form 1099)	1.	
2.	Net profit or (loss) per Federal Schedule C of Form 1040 (Attach Schedule C, Pages 1 and 2)	2.	
3.	Gain or loss on sales of business property from Federal Form 4797 or form 6252 reported on Schedule D of Form 1040 (Attach Form 4797 Pages 1 and 2 or Form 6262)	3.	
4.	Rental income or (loss) per Federal Schedule E of Form 1040	4.	
5.	Net Farm income or (loss) per Federal Schedule F of Form 1040	5.	
6.	State and local fees or taxes based on income deducted on Federal Schedule C, E or F	6.	
7.	Total Income (Add lines 1 through 6)	7	
8.	Alcoholic Beverage Sales Deduction (Attach Computation Sheet)	8.	
	Other Adjustment (See instructions) (Attach schedule and full explanation)	<u>9</u>	
10.	Adjusted Net Profit (Subtract line 8 and 9 from line 7)	10.	
	Enter here and on line 1 of the Net Profit License Tax return		
	WORKSHEET P: For Business Entities required to file an PARTNERSHIP U.S. Income T	ax	Return
1.	Ordinary income or (loss) per Federal Form 1065 (Attach Form 1065, Pages 1, 2 and 3, Schedule of Other Deductions, and rental schedule(s), if applicable)	1.	
2.	State and local license fees or taxes based on income deducted on the Federal Form 1065 (Attach schedule)	2.	
3.	Additions from Schedule K of Federal Form 1065 (See instructions)(Attach Schedule K and rental schedules if applicable)	3.	
4.	Partner's Salaries	4.	
5.	Total Income (Add lines 1 through 4)	5.	
6.	Subtractions from Schedule K of Federal Form 1065 (See Instructions)	6.	
7.	Alcoholic Beverage Sales Deduction (Attach Computation Sheet)	7	
	Other Adjustments (See instructions) (Attach schedule and full explanation)	8. 9.	
	Total Adjustments (Add Lines 6 through 8)		
10.	Adjusted Net Profit (Subtract line 9 from line 5) Enter here and on line 1 of the Net profit License Tax return	10.	
	Enter here and on line it of the Net profit License rax return		
	WORKSHEET C: For Business Entities required to file an CORPORATE U.S. Income Ta	ax F	Return
1.	Taxable income or (loss) per Federal Form 1120 or 1120A or Ordinary Income or (loss) per Federal Form 1120S (Attach the applicable 1120 or 1120A, Pages 1 and 2 or 1120S Pages 1, 2 and 3, Schedule of Other Deductions and rental schedules if applicable)	1.	
2.	State and local license fees or taxes based on income deducted on the Federal Form 1120, 1120A or 1120S (Attach Schedule)	2.	
3.	Net operating loss deduction	3.	
4.	Additions from Schedule K of Federal Form 1120S (See instructions)(Attach Schedule K and rental schedules if applicable)	4.	
5.	Total Income (Add lines 1 through 4)	5.	
	Subtractions from Schedule K of Federal Form 1065 (See Instructions)(Attach Schedule K and rental schedules if applicable)	6.	
7.	Alcoholic Beverage Sales Deduction (Attach Computation Sheet)	7.	
	Other Adjustments (See instructions) (Attach schedule and full explanation)		
	Total Adjustments (Add Lines 6 through 8)	9.	
10.	Adjusted Net Profit (Subtract line 9 from line 5)	10.	
	Enter here and on line 1 of the Net profit License Tax return		